

FROM McANDREWS, HELD, & MALLOY

(MON) 7.11'05 11:17/ST. 11:17/N0. 4861050715 P 1



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TO: M. Milord  
Examiner, Group Art Unit 2682

FAX NO.: (703) 872-9306

FROM: Michael T. Cruz

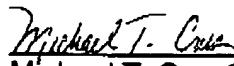
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MATTER: 15258US06

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Michael T. Cruz  
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PTO/SB/21 (09-04)

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<b>TRANSMITTAL FORM</b>		Application Number	09/698,550
		Filing Date	October 27, 2000
		First Named Inventor	Moloudi
		Art Unit	2682
		Examiner Name	M. Milord
Total Number of Pages in This Submission	6	Attorney Docket Number	15258US06

**ENCLOSURES (check all that apply)**

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
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<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		
	Remarks	

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm	McAndrews Held & Malloy, Ltd.		
Signature			
Printed Name	Michael T. Cruz		
Date	July 11, 2005		

**CERTIFICATE OF FAX TRANSMITTAL**

I hereby certify that this correspondence is being sent via facsimile to Examiner M. Milord at the United States Patent and Trademark Office, fax No. 703 872 9306, on July 11, 2005.

Name (Print/type)	Michael T. Cruz	Registration No. (Attorney/Agent)	44,636
Signature		Date	July 11, 2005

FROM McANDREWS, HELD, &amp; MALLOY

(MON) 7.11'05 11:18/ST. 11:17/NO. 4861050715 P 3

PTO/SB/17 (12-04)

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Fees pursuant to the consolidated Appropriates Act 2005 (H.R. 4818).

# FEE TRANSMITTAL for FY 2005

 Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT (\$)** **620.00**

<i>Complete if Known</i>	
Application Number	09/698,550
Filing Date	October 27, 2000
First Named Inventor	Moloudi
Examiner Name	M. Milord
Art Unit	2682

METHOD OF PAYMENT (check all that apply)

 Check  Credit Card  Money Order  None  Other (please identify): \_\_\_\_\_ Deposit Account Deposit Account Number: 13-0017 Deposit Account Name: McAndrews Held & Malloy

For the above-identified deposit account, the Director is hereby authorized to (check all that apply)

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**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		<u>Fees Paid(\$)</u>
	<u>Fee (\$)</u>	<u>Small Entity Fee(\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee(\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee(\$)</u>	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	120	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES**Fee Description

Each claim over 20, or for Reissues, each claim over 20 and more than in the original patent

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

Multiple dependent claims

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee(\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	
				<u>Fee</u>	<u>Fee Paid (\$)</u>
-20 or HP	x	=			

HP = highest number of total claims paid for, if greater than 20

<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee(\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	
				<u>Fee</u>	<u>Fee Paid (\$)</u>
-3 or HP	x	=			

HP = highest number of independent claims paid for, if greater than 3

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee(\$)</u>	<u>Fee Paid(\$)</u>	
				<u>Fee</u>	<u>Fee Paid (\$)</u>
-100	/50	(round up to a whole number)	x	=	

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other: Notice of Appeal \$500; 1-mo. ext. of time \$120

620

**SUBMITTED BY**

<u>Signature</u>	<u>Michael T. Cruz</u>	<u>Registration No.</u> (Attorney/Agent)	44,636	<u>Telephone</u>	(312) 775-8000
Name (print/type)		Date			July 11, 2005